Maryland HIV/AIDS Quarterly Update

First Quarter 2017 Data reported through March 31, 2017



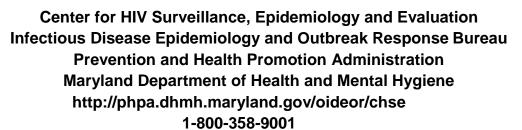


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Section I – Background Information

HIV/AIDS Reporting Requirements

The Maryland HIV/AIDS Reporting Act of 2007 went into effect on April 24, 2007. The law expanded HIV/AIDS reporting and required that HIV cases be reported by name. The following highlights the reporting requirements of Health-General Articles 18-201.1, 18-202.1, and 18-205 of the Annotated Code of Maryland, as specified in COMAR 10.18.02.

- Physicians are required to report patients in their care with diagnoses of HIV or AIDS immediately to the Local Health Department where the physician's office is located by mailing DHMH Form 1140. Reports are also accepted by phone.
- Physicians are required to report infants born to HIV positive mothers within 48 hours to the State Health Department by mailing DHMH Form 1140. Reports are also accepted by phone.
- Clinical and infection control practitioners in hospitals, nursing homes, hospice facilities, medical clinics in
 correctional facilities, inpatient psychiatric facilities, and inpatient drug rehabilitation facilities are required to report
 patients in the care of the institution with diagnoses of HIV or AIDS within 48 hours to the Local Health
 Department where the institution is located by mailing DHMH Form 1140. Reports are also accepted by phone.

- Facilities with large volumes are encouraged to contact the State Health Department to establish electronic reporting.
- Laboratory directors are required to report patients with laboratory results indicating HIV infection (e.g., positive
 confirmatory HIV diagnostic tests, all CD4 immunological tests, all HIV viral load tests, and all HIV genotype and
 phenotype tests) within 48 hours to the Local Health Department where the laboratory is located, or if out of state
 to the Maryland State Health Department, by mailing DHMH Form 4492. Laboratories are encouraged to contact
 the State Health Department to establish electronic reporting.

Reporting forms and instructions are available on our website: http://phpa.dhmh.maryland.gov/oideor/chse/sitepages/reporting-material.aspx

For Assistance with HIV/AIDS Reporting

For assistance with reporting, including establishment of routine, electronic, or other alternate methods of reporting to the Health Department, please contact the Center for HIV Surveillance, Epidemiology and Evaluation in the Maryland Department of Health and Mental Hygiene at 410-767-5227.

Limitations in the HIV/AIDS Data

This epidemiological profile only contains data for HIV and AIDS cases that have been diagnosed by a health care provider, were reported to the health department by name, and were residents of Maryland at the time of diagnosis. Nationally, it has been estimated that 13.0% of people living with HIV infection are undiagnosed. In Maryland, it is estimated that 15.3% of people living with HIV infection are undiagnosed. In addition, despite a massive effort during which over 17,000 HIV cases were reported after the Maryland HIV reporting law changed on April 24, 2007, not all diagnosed HIV cases previously reported by Maryland's code-based identifier were located and re-reported by name. In addition, many of the re-reported HIV cases were identified by a recent diagnosis and not by their earliest diagnosis, resulting in an under-reporting of HIV diagnoses before 2001 and an over-reporting of HIV diagnoses from 2001 to 2008. Caution should be exercised in using the number of living HIV cases without AIDS and in interpreting trends in the number of reported HIV diagnoses. Furthermore, laboratory data are only available for cases receiving medical care, usually only at facilities in Maryland, and only includes test results that have been reported to the health department.

In addition to providing estimates of prevalent cases by residence at HIV diagnosis, this epidemiological profile includes estimates for HIV cases whose current residence as of 3/31/2017 was in Maryland. Current residence data are restricted to cases for which there is a case report form or laboratory test reported between 1/1/2009 and 3/31/2017. Restricting address data to recent years presents the most accurate data available and helps to account for cases that may have moved out of state whose data would no longer be reported in Maryland. However, current residence data excludes cases that may be residents of Maryland but have fallen out of care during the most recent seven years. Current residence utilizes addresses as recent as 2017 but uses laboratory data from 2016 to allow for laboratory reporting.

Please note that data reported in the quarterly reports may not match data reported in the annual epidemiological profiles due to differences in reporting periods. In addition, not all data has been geocoded in the quarterly reports and therefore is preliminary. Geocoding is the process of assigning geographic identifiers to map features and data records. Addresses are standard data elements required by law and submitted as part of reporting requirements; however, the information may be incomplete which then requires a geocoding process to improve the quality of data. This process is fully completed on the end-of-the-year data set.

Stages of a Case of HIV/AIDS

Untreated HIV disease progresses from HIV infection to AIDS to death. These are biological events that occur whether or not a person receives any medical care. For example, a person can be HIV infected but never have an HIV test and so they do not have an HIV diagnosis. A medical provider diagnoses that these biological events have occurred and records them as a medical event. The law requires medical providers to report these medical events to the Health Department, thereby creating a surveillance event.

Time Point	Biological Event	Medical Event	Surveillance Event
1	HIV Infection		
2		HIV Diagnosis	
3			HIV Report
4	AIDS Conditions		
5		AIDS Diagnosis	
6			AIDS Report
7	Death		
8		Death Diagnosis	
9			Death Report

For surveillance purposes, a case of HIV/AIDS can only move through time in one direction, from HIV infection to death report [from time point 1 to time point 9], but may skip over individual stages. Events can occur simultaneously, but usually there is a time lag between them. The time lag between events can be measured in days, months, or years.

For example, the time between HIV infection [time point 1] and the test that diagnoses HIV [time point 2] may be several years, and it may then take several days for the laboratory and physician to report the diagnosis to the health department [time point 3]. In a second example, a person with diagnosed and reported HIV infection [time point 3] may die [time point 7] without developing AIDS, thereby skipping the three AIDS events (conditions, diagnosis, and report [time points 4, 5 and 6]). And in a third example, a person with undiagnosed HIV infection [time point 1] may become sick, enter the hospital, and die [time point 7] of what is later determined to be AIDS. In that situation, HIV diagnosis [time point 2], AIDS diagnosis [time point 5], and death diagnosis [time point 8] would all occur at the same time, and that would have been many years after the initial HIV infection [time point 1].

Changes in Case Terminology

The terminology for HIV and AIDS cases was changed from earlier epidemiological profiles to be more precise, with Reported Diagnoses replacing Incidence and Living Cases replacing Prevalence. Incidence is a measure of the number of new events (such as HIV infections) in a population during a period of time. Prevalence is a measure of the number of people living with a condition (such as HIV) in a population at a certain time. Prevalence includes both new and old diagnosed cases as well as undiagnosed infections. For HIV, Incidence and Prevalence cannot be directly measured and must be estimated using statistical methods. The HIV surveillance system is able to provide the actual number of diagnoses and deaths that are reported in the population.

For this epidemiological profile, the reports received through a certain time (a quarter-year) are used to generate the number of diagnoses during the prior years. This six-month lag allows for delays in reporting and time to complete investigations. For example, the Reported HIV Diagnoses for 10/01/2015-9/30/2016 are the total of the reported HIV cases with or without an AIDS diagnosis, diagnosed with HIV during 10/01/2015-9/30/2016, as reported by name through 3/31/2017.

To calculate the number of Living Cases we count up all of the Reported Diagnoses from the beginning of the epidemic (all the Reported HIV Diagnoses each year) and subtract all of the Reported Deaths. For example, the Total Living HIV Cases on 9/30/2016 are the total of the reported HIV Cases with or without an AIDS diagnosis and not reported to have died as of 3/31/2017 as reported by name through 3/31/2017.

Laboratory Data

CD4+ T-lymphocyte tests are measures of a person's immune system function. An HIV infected adult is considered to have AIDS if they have less than 200 CD4 cells per microliter of blood. Viral load (VL) tests are measures of the amount of HIV in a person's body. The goal of HIV treatment is to have a very low number of copies of virus per milliliter of blood, below what the test can measure, which is called an undetectable level. Treatment recommendations are that a person in HIV medical care should have their CD4 and VL levels measured regularly, at least once per year. We use the presence of these lab tests as an indicator that someone has been "linked to care" initially after diagnosis or in following years that they remain "in care".

Sources of Data

Information on HIV and AIDS diagnoses, including residence at diagnosis, age, race/ethnicity, sex at birth, country of birth, vital status, HIV exposure category, and CD4 and HIV viral load test results are from the Maryland Department of Health and Mental Hygiene's Enhanced HIV/AIDS Reporting System (eHARS), March 31, 2017.

Population data by sex, age, and race/ethnicity are from the July 1, 2015 U.S. Census Estimates. Due to estimation limitations, some population totals may not equal the sum of its components.

Tabulation of Column Totals

Figures in tables and generally in the text have been rounded. Discrepancies in tables between totals and sums of components are due to rounding.

Data Suppression

In order to protect the confidentiality of reported HIV cases, data are suppressed in the following instances:

- Data describing a demographic group or geographic area (e.g. ZIP code) with a population less than 1,000 people.
- All clinical/laboratory information if it is describing less than 5 cases.
- All exposure/risk information if it is describing less than 5 cases, except in the case of "other" exposure.
- If any cell is suppressed, additional cells are also suppressed as necessary to prevent back calculation of the suppressed cell(s).

Glossary of Terms

Adult/Adolescent Living HIV Cases with AIDS: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Adult/Adolescent Living HIV Cases without AIDS: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Adult/Adolescent Reported AIDS Diagnoses: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial AIDS diagnosis during the specified year.

Adult/Adolescent Reported HIV Diagnoses: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial HIV diagnosis during the specified year.

Adult/Adolescent Total Living HIV Cases: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

CD4 Result Distribution (<200, 200-349, 350-499, 500+): Percent of cases with a CD4 test distributed by their CD4 count results (cells per microliter).

Current Residence: Jurisdiction of residence from the most recent laboratory test or case report between 1/1/2009-3/31/2017.

First CD4 Test Result: First reported CD4 test result obtained within 12 months following initial HIV diagnosis.

Jurisdiction of Residence at AIDS Diagnosis: Jurisdiction of residence at time of initial AIDS diagnosis.

Jurisdiction of Residence at Diagnosis: Jurisdiction of residence at the later of time of initial HIV diagnosis or time of initial AIDS diagnosis.

Jurisdiction of Residence at HIV Diagnosis: Jurisdiction of residence at time of initial HIV diagnosis.

Mean Years from HIV Diagnosis (to AIDS Diagnosis): Mean number of years from initial HIV diagnosis to initial AIDS diagnosis for cases with a reported AIDS diagnosis.

Median: The measure of central location which divides a set of data into two equal parts.

Median Count (First CD4): Median CD4 count (cells per microliter) of the first CD4 test result reported within 12 months following initial HIV diagnosis.

Median Count (Recent CD4): Median CD4 count (cells per microliter) of the most recent CD4 test result measured in the specified year, reported through 3/31/2017.

Median Unsuppressed (Viral Load): Median unsuppressed viral load (copies per milliliter) among adult/adolescent living HIV cases with a most recent viral load test result measured in the specified year of 200 copies per milliliter or greater, reported through 3/31/2017.

Percent Change: The extent to which a county gained or lost HIV/AIDS cases relative to the number of cases diagnosed in the county.

Percent Late HIV Diagnosis (for AIDS diagnoses): Percent of adult/adolescent reported AIDS diagnoses with an initial HIV diagnosis less than or equal to 12 months prior to their initial AIDS diagnosis.

Percent Late HIV Diagnosis (for HIV diagnoses): Percent of adult/adolescent reported HIV diagnoses with an initial AIDS diagnosis less than or equal to 12 months after their initial HIV diagnosis.

Percent Linked to Care: Percent of adult/adolescent reported HIV diagnoses with a CD4 or viral load test performed less than or equal to 3 months after their initial HIV diagnosis.

Percent Suppressed (Viral Load): Percent of adult/adolescent total living HIV cases with a most recent viral load measured in the specified year of less than 200 copies per milliliter reported through 3/31/2017.

Population Age 13+: Population age 13 years or older, estimate for 7/1/2015.

Rate: A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

Ratio (1 in X): Number of people for every 1 living HIV case in the population, or 1 living HIV case in every X number of people.

Recent CD4 Test Result: The most recent CD4 test result measured in the specified year, reported through 3/31/2017.

Recent Viral Load Test Result: The most recent viral load test result measured in the specified year, reported through 3/31/2017.

DHMH Non-Discrimination Statement

The Department of Health and Mental Hygiene (DHMH) complies with applicable Federal civil right laws and does not discriminate on the basis of race, color, national origin, age, disability in its health programs and activities.

English

Help is available in your language: 410-767-5227 (TTY: 1-800-735-2258). These services are available for free.

Español/Spanish

Hay ayuda disponible en su idioma: 410-767-5227 (TTY: 1-800-735-2258). Estos servicios están disponibles gratis.

中文/Chinese

用您的语言为您提供帮助: 410-767-5227 (TTY: 1-800-735-2258). 这些服务都是免费的

Suggested Citation: Maryland HIV/AIDS Quarterly Update, First Quarter 2017. Baltimore, MD: Center for HIV Surveillance, Epidemiology and Evaluation, Infectious Disease Epidemiology and Outbreak Response Bureau, Prevention and Health Promotion Administration, Maryland Department of Health and Mental Hygiene. April 2017.

Section II - Adult/Adolescent Cases by Jurisdiction

Table 1 – Adult/Adolescent HIV Diagnoses during 10/1/2015-9/30/2016, First CD4 Test Result, Percent Linked to Care, and Percent Late Diagnosis, by Jurisdiction, Reported through 3/31/2017

JURISDICTION				Adult/A	Adolescent I	Reported HI	V Diagnose	S	
OF RESIDENCE	Population		0/ -4		First	CD4 Test R	esult	0/ 1 into d	% Late
AT HIV	Age 13+	No.	% of Total	Rate	No. with	% with	Median	% Linked to Care	HIV
DIAGNOSIS			TOTAL		Test	Test	Count	to Care	Diagnosis
Allegany	63,523	2	0.2%	3.1	***	***	***	***	***
Anne Arundel	472,498	52	4.6%	11.0	42	80.8%	238	82.7%	34.6%
Baltimore City	523,202	271	23.8%	51.8	230	84.9%	415	86.7%	20.7%
Baltimore	701,736	164	14.4%	23.4	135	82.3%	400	90.9%	22.0%
Calvert	76,074	5	0.4%	6.6	5	100.0%	488	100.0%	20.0%
Caroline	27,119	1	0.1%	3.7	***	***	***	***	***
Carroll	142,863	1	0.1%	0.7	***	***	***	***	***
Cecil	85,936	3	0.3%	3.5	***	***	***	***	***
Charles	129,678	26	2.3%	20.0	24	92.3%	363	92.3%	23.1%
Dorchester	27,278	7	0.6%	25.7	5	71.4%	169	100.0%	42.9%
Frederick	204,660	17	1.5%	8.3	15	88.2%	538	88.2%	11.8%
Garrett	25,567	0	0.0%	0.0	0	0.0%		0.0%	0.0%
Harford	210,992	21	1.8%	10.0	16	76.2%	107	85.7%	47.6%
Howard	260,100	27	2.4%	10.4	22	81.5%	288	81.5%	25.9%
Kent	17,436	1	0.1%	5.7	***	***	***	***	***
Montgomery	864,331	173	15.2%	20.0	150	86.7%	371	87.9%	24.3%
Prince George's	758,979	299	26.2%	39.4	265	88.6%	371	86.3%	23.1%
Queen Anne's	41,518	1	0.1%	2.4	***	***	***	***	***
Saint Mary's	91,688	5	0.4%	5.5	***	***	***	***	***
Somerset	22,563	5	0.4%	22.2	5	100.0%	559	100.0%	20.0%
Talbot	32,559	4	0.4%	12.3	***	***	***	***	***
Washington	126,168	8	0.7%	6.3	8	100.0%	183	100.0%	37.5%
Wicomico	86,317	16	1.4%	18.5	14	87.5%	318	87.5%	25.0%
Worcester	45,221	2	0.2%	4.4	***	***	***	***	***
Corrections		30	2.6%		26	86.7%	430	83.3%	16.7%
TOTAL	5,038,007	1,141	100.0%	22.6	979	85.8%	376	87.3%	23.4%

^{***} Data withheld due to low population counts and/or case counts

Adult/Adolescent Reported HIV Diagnoses: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial HIV diagnosis during the specified year.

Jurisdiction of Residence at HIV Diagnosis: Jurisdiction of residence at time of initial HIV diagnosis.

Population Age 13+: Population age 13 years or older, estimate for 7/1/2015.

Rate: A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

First CD4 Test Result: First reported CD4 test result obtained within 12 months following initial HIV diagnosis.

Median Count (First CD4): Median CD4 count (cells per microliter) of the first CD4 test result reported within 12 months following initial HIV diagnosis.

Percent Linked to Care: Percent of adult/adolescent reported HIV diagnoses with a CD4 or viral load test performed less than or equal to 3 months after their initial HIV diagnosis.

Percent Late HIV Diagnosis (for HIV diagnoses): Percent of adult/adolescent reported HIV diagnoses with an initial AIDS diagnosis less than or equal to 12 months after their initial HIV diagnosis.

Table 2 – Adult/Adolescent AIDS Diagnoses during 10/1/2015-9/30/2016, Mean Years from HIV Diagnosis and Percent Late HIV Diagnosis, by Jurisdiction, Reported through 3/31/2017

JURISDICTION		Adult/Adolescent Reported AIDS Diagnoses								
OF RESIDENCE AT AIDS DIAGNOSIS	Population Age 13+	No.	% of Total	Rate	Mean Years from HIV Diagnosis	% Late HIV Diagnosis				
Allegany	63,523	2	0.3%	3.1	***	***				
Anne Arundel	472,498	31	5.3%	6.6	3.7	61.3%				
Baltimore City	523,202	172	29.4%	32.9	6.1	33.7%				
Baltimore	701,736	86	14.7%	12.3	5.5	43.0%				
Calvert	76,074	2	0.3%	2.6	***	***				
Caroline	27,119	0	0.0%	0.0		0.0%				
Carroll	142,863	1	0.2%	0.7	***	***				
Cecil	85,936	3	0.5%	3.5	***	***				
Charles	129,678	11	1.9%	8.5	2.5	72.7%				
Dorchester	27,278	6	1.0%	22.0	5.1	66.7%				
Frederick	204,660	5	0.9%	2.4	1.2	60.0%				
Garrett	25,567	0	0.0%	0.0		0.0%				
Harford	210,992	13	2.2%	6.2	2.3	61.5%				
Howard	260,100	14	2.4%	5.4	2.2	42.9%				
Kent	17,436	1	0.2%	5.7	***	***				
Montgomery	864,331	74	12.6%	8.6	2.9	63.5%				
Prince George's	758,979	134	22.9%	17.7	4.6	45.5%				
Queen Anne's	41,518	2	0.3%	4.8	***	***				
Saint Mary's	91,688	3	0.5%	3.3	***	***				
Somerset	22,563	2	0.3%	8.9	***	***				
Talbot	32,559	1	0.2%	3.1	***	***				
Washington	126,168	4	0.7%	3.2	***	***				
Wicomico	86,317	8	1.4%	9.3	***	***				
Worcester	45,221	0	0.0%	0.0		0.0%				
Corrections		11	1.9%		3.3	63.6%				
TOTAL	5,038,007	586	100.0%	11.6	4.7	46.9%				

^{***} Data withheld due to low population counts and/or case counts

Adult/Adolescent Reported AIDS Diagnoses: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an initial AIDS diagnosis during the specified year.

Jurisdiction of Residence at AIDS Diagnosis: Jurisdiction of residence at time of initial AIDS diagnosis.

Population Age 13+: Population age 13 years or older, estimate for 7/1/2015.

Rate: A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

Mean Years from HIV Diagnosis (to AIDS Diagnosis): Mean number of years from initial HIV diagnosis to initial AIDS diagnosis for cases with a reported AIDS diagnosis.

Percent Late HIV Diagnosis (for AIDS diagnoses): Percent of adult/adolescent reported AIDS diagnoses with an initial HIV diagnosis less than or equal to 12 months prior to their initial AIDS diagnosis.

Table 3 – Adult/Adolescent HIV Cases Alive on 9/30/2016, by Jurisdiction of Residence, Reported through 3/31/2017

JURISDICTION OF RESIDENCE	Population Age 13+	Livir	Living HIV Cases Living without AIDS wi			ult/Adolese ing HIV Ca with AIDS	ases	Adult/Adolescent Total Living HIV Cases			
OF REGIDENCE	Age 10+	No.	% of Total	Rate	No.	% of Total	Rate	No.	% of Total	Rate	Ratio (1 in X)
Allegany	63,523	39	0.3%	61.4	57	0.4%	89.7	96	0.3%	151.1	661
Anne Arundel	472,498	589	4.4%	124.7	659	4.1%	139.5	1,248	4.3%	264.1	378
Baltimore City	523,202	4,041	30.2%	772.4	5,680	35.7%	1,085.6	9,721	33.2%	1,858.0	53
Baltimore	701,736	1,421	10.6%	202.5	1,687	10.6%	240.4	3,108	10.6%	442.9	225
Calvert	76,074	62	0.5%	81.5	63	0.4%	82.8	125	0.4%	164.3	608
Caroline	27,119	30	0.2%	110.6	42	0.3%	154.9	72	0.2%	265.5	376
Carroll	142,863	55	0.4%	38.5	49	0.3%	34.3	104	0.4%	72.8	1,373
Cecil	85,936	53	0.4%	61.7	73	0.5%	84.9	126	0.4%	146.6	682
Charles	129,678	248	1.9%	191.2	226	1.4%	174.3	474	1.6%	365.5	273
Dorchester	27,278	43	0.3%	157.6	85	0.5%	311.6	128	0.4%	469.2	213
Frederick	204,660	189	1.4%	92.3	179	1.1%	87.5	368	1.3%	179.8	556
Garrett	25,567	7	0.1%	27.4	5	0.0%	19.6	12	0.0%	46.9	2,130
Harford	210,992	194	1.4%	91.9	248	1.6%	117.5	442	1.5%	209.5	477
Howard	260,100	293	2.2%	112.6	282	1.8%	108.4	575	2.0%	221.1	452
Kent	17,436	7	0.1%	40.1	24	0.2%	137.6	31	0.1%	177.8	562
Montgomery	864,331	1,619	12.1%	187.3	1,593	10.0%	184.3	3,212	11.0%	371.6	269
Prince George's	758,979	3,674	27.4%	484.1	3,743	23.5%	493.2	7,417	25.3%	977.2	102
Queen Anne's	41,518	20	0.1%	48.2	29	0.2%	69.8	49	0.2%	118.0	847
Saint Mary's	91,688	74	0.6%	80.7	84	0.5%	91.6	158	0.5%	172.3	580
Somerset	22,563	29	0.2%	128.5	40	0.3%	177.3	69	0.2%	305.8	327
Talbot	32,559	28	0.2%	86.0	42	0.3%	129.0	70	0.2%	215.0	465
Washington	126,168	152	1.1%	120.5	190	1.2%	150.6	342	1.2%	271.1	368
Wicomico	86,317	97	0.7%	112.4	132	0.8%	152.9	229	0.8%	265.3	376
Worcester	45,221	34	0.3%	75.2	51	0.3%	112.8	85	0.3%	188.0	532
Corrections		394	2.9%		664	4.2%		1,058	3.6%		
TOTAL	5,038,007	13,392	100.0%	265.8	15,927	100.0%	316.1	29,319	100.0%	582.0	171

Jurisdiction of Residence: Jurisdiction of residence at time of initial HIV diagnosis or most recent lab test.

Population Age 13+: Population greater than or equal to 13 years old, estimate for 7/1/2015.

Adult/Adolescent Living HIV Cases without AIDS: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Adult/Adolescent Living HIV Cases with AIDS: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Adult/Adolescent Total Living HIV Cases: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Rate: A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

Ratio (1 in X): Number of people for every 1 living HIV case in the population, or 1 living HIV case in every X number of people.

Table 3A – Adult/Adolescent HIV Cases Alive on 9/30/2016, by Jurisdiction and Current Residence, Reported through 3/31/2017

JURISDICTION		Adult/Adolescent Living HIV Cases with or without AIDS Diagnosis Residence at HIV Diagnosis Current Residence										
OF	Population	Re	sidence at H	IIV Diagnosi	S		%					
RESIDENCE	Age 13+	No.	% of Total	Rate	Ratio	No.	% of Total	Rate	Ratio	Change		
Allegany	63,523	72	0.2%	113.3	882	96	0.3%	151.1	661	33.3%		
Anne Arundel	472,498	1,249	3.9%	264.3	378	1,248	4.3%	264.1	378	-0.1%		
Baltimore City	523,202	11,909	37.1%	2,276.2	43	9,721	33.2%	1,858.0	53	-18.4%		
Baltimore	701,736	3,330	10.4%	474.5	210	3,108	10.6%	442.9	225	-6.7%		
Calvert	76,074	99	0.3%	130.1	768	125	0.4%	164.3	608	26.3%		
Caroline	27,119	65	0.2%	239.7	417	72	0.2%	265.5	376	10.8%		
Carroll	142,863	134	0.4%	93.8	1066	104	0.4%	72.8	1,373	-22.4%		
Cecil	85,936	109	0.3%	126.8	788	126	0.4%	146.6	682	15.6%		
Charles	129,678	462	1.4%	356.3	280	474	1.6%	365.5	273	2.6%		
Dorchester	27,278	128	0.4%	469.2	213	128	0.4%	469.2	213	0.0%		
Frederick	204,660	335	1.0%	163.7	610	368	1.3%	179.8	556	9.9%		
Garrett	25,567	8	0.0%	31.3	3195	12	0.0%	46.9	2,130	50.0%		
Harford	210,992	435	1.4%	206.2	485	442	1.5%	209.5	477	1.6%		
Howard	260,100	520	1.6%	199.9	500	575	2.0%	221.1	452	10.6%		
Kent	17,436	36	0.1%	206.5	484	31	0.1%	177.8	562	-13.9%		
Montgomery	864,331	4,018	12.5%	464.9	215	3,212	11.0%	371.6	269	-20.1%		
Prince George's	758,979	6,946	21.6%	915.2	109	7,417	25.3%	977.2	102	6.8%		
Queen Anne's	41,518	49	0.2%	118.0	847	49	0.2%	118.0	847	0.0%		
Saint Mary's	91,688	131	0.4%	142.9	699	158	0.5%	172.3	580	20.6%		
Somerset	22,563	57	0.2%	252.6	395	69	0.2%	305.8	327	21.1%		
Talbot	32,559	60	0.2%	184.3	542	70	0.2%	215.0	465	16.7%		
Washington	126,168	295	0.9%	233.8	427	342	1.2%	271.1	368	15.9%		
Wicomico	86,317	218	0.7%	252.6	395	229	0.8%	265.3	376	5.0%		
Worcester	45,221	77	0.2%	170.3	587	85	0.3%	188.0	532	10.4%		
Corrections		1,345	4.2%		-	1,058	3.6%		-	-21.3%		
Total	5,038,007	32,087	100.0%	636.9	157	29,319	100.0%	582.0	171	-8.6%		

Adult/Adolescent Total Living HIV Cases: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of December 31st of the specified year.

Jurisdiction of Residence: Jurisdiction of residence at time of initial HIV diagnosis or most recent lab test.

Population Age 13+: Population age 13 years or older, estimate for 7/1/2015.

Residence at HIV Diagnosis: Jurisdiction of residence at time of initial HIV diagnosis.

Current Residence: Jurisdiction of residence from the most recent laboratory test or case report between 1/1/2009-3/31/2017.

Rate: A proportion used to represent risk for disease within a given population. It is calculated by dividing the number of diagnoses by the number of persons at risk (population estimate).

Ratio (1 in X): Number of people for every 1 living HIV case in the population, or 1 living HIV case in every X number of people.

Percent Change: The extent to which a county gained or lost HIV/AIDS cases relative to the number of cases diagnosed in the county.

For additional information regarding current residence, please contact the Center for HIV Surveillance, Epidemiology and Evaluation in the Maryland Department of Health and Mental Hygiene at 410-767-5227.

Table 4 – CD4 Test Results for Adult/Adolescent HIV Cases Alive on 9/30/2016, by Current Residence as of 3/31/2017, Reported through 3/31/2017

	Adult/Adolescent Total Living HIV Cases										
JURISDICTION OF RESIDENCE				Recer	nt CD4 Test Ro	esult					
	No.	No. with Test	% with Test	Median Count	<200	200-349	350-499	500+			
Allegany	96	83	86.5%	644	3.6%	9.6%	21.7%	65.1%			
Anne Arundel	1,248	815	65.3%	569	11.2%	13.7%	16.8%	58.3%			
Baltimore City	9,721	6,568	67.6%	533	13.4%	14.7%	17.8%	54.1%			
Baltimore	3,108	2,018	64.9%	575	10.5%	13.5%	17.3%	58.6%			
Calvert	125	99	79.2%	704	7.1%	15.2%	12.1%	65.7%			
Caroline	72	40	55.6%	696	2.5%	15.0%	10.0%	72.5%			
Carroll	104	68	65.4%	621	7.4%	20.6%	11.8%	60.3%			
Cecil	126	79	62.7%	610	5.1%	13.9%	19.0%	62.0%			
Charles	474	298	62.9%	565	10.7%	14.4%	18.8%	56.0%			
Dorchester	128	97	75.8%	527	10.3%	17.5%	17.5%	54.6%			
Frederick	368	245	66.6%	610	5.3%	12.7%	12.7%	69.4%			
Garrett	12	9	75.0%	670	0.0%	11.1%	11.1%	77.8%			
Harford	442	286	64.7%	560	10.5%	18.5%	14.7%	56.3%			
Howard	575	392	68.2%	595	13.5%	10.7%	16.3%	59.4%			
Kent	31	23	74.2%	595	4.3%	13.0%	21.7%	60.9%			
Montgomery	3,212	2,105	65.5%	552	8.1%	15.1%	20.2%	56.6%			
Prince George's	7,417	4,915	66.3%	542	11.3%	14.2%	19.1%	55.4%			
Queen Anne's	49	38	77.6%	625	5.3%	18.4%	15.8%	60.5%			
Saint Mary's	158	110	69.6%	575	10.0%	13.6%	17.3%	59.1%			
Somerset	69	45	65.2%	603	13.3%	8.9%	13.3%	64.4%			
Talbot	70	52	74.3%	425	15.4%	17.3%	25.0%	42.3%			
Washington	342	252	73.7%	625	10.3%	11.1%	12.3%	66.3%			
Wicomico	229	173	75.5%	491	15.6%	15.0%	20.8%	48.6%			
Worcester	85	70	82.4%	608	7.1%	15.7%	11.4%	65.7%			
Corrections	1,058	744	70.3%	482	18.3%	16.3%	17.1%	48.4%			
TOTAL	29,319	19,624	66.9%	549	11.7%	14.4%	18.0%	55.9%			

Adult/Adolescent Total Living HIV Cases: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Recent CD4 Test Result: The most recent CD4 test result measured in the specified year, reported through 3/31/2017.

Jurisdiction of Residence: Jurisdiction of residence at time of initial HIV diagnosis or most recent lab test.

Median Count (Recent CD4): Median CD4 count (cells per microliter) of the most recent CD4 test result measured in the specified year, reported through 3/31/2017.

CD4 Result Distribution (<200, 200-349, 350-499, 500+): Percent of cases with a CD4 test distributed by their CD4 count results (cells per microliter).

Table 5 – Viral Load Test Results for Adult/Adolescent HIV Cases Alive on 9/31/2016, by Current Residence as of 3/31/2017, Reported through 3/31/2017

	Adult/Adolescent Total Living HIV Cases								
JURISDICTION OF		Recent Viral Load Test Result							
RESIDENCE	No.	No. with Test	% with Test	% Suppressed	Median Unsuppressed				
Allegany	96	73	76.0%	87.7%	5,733				
Anne Arundel	1,248	765	61.3%	78.7%	9,019				
Baltimore City	9,721	6,005	61.8%	73.8%	10,261				
Baltimore	3,108	1,890	60.8%	78.6%	12,644				
Calvert	125	103	82.4%	86.4%	7,845				
Caroline	72	43	59.7%	83.7%	3,794				
Carroll	104	70	67.3%	84.3%	26,507				
Cecil	126	78	61.9%	85.9%	6,700				
Charles	474	308	65.0%	79.5%	14,890				
Dorchester	128	99	77.3%	84.8%	861				
Frederick	368	252	68.5%	90.9%	45,060				
Garrett	12	9	75.0%	100.0%					
Harford	442	265	60.0%	84.5%	17,140				
Howard	575	381	66.3%	79.0%	18,400				
Kent	31	23	74.2%	87.0%	36,500				
Montgomery	3,212	2,101	65.4%	87.0%	7,130				
Prince George's	7,417	4,900	66.1%	81.6%	12,732				
Queen Anne's	49	36	73.5%	94.4%	14,621				
Saint Mary's	158	108	68.4%	83.3%	9,865				
Somerset	69	41	59.4%	75.6%	47,000				
Talbot	70	51	72.9%	88.2%	37,087				
Washington	342	242	70.8%	84.3%	4,052				
Wicomico	229	169	73.8%	76.9%	22,070				
Worcester	85	66	77.6%	90.9%	34,547				
Corrections	1,058	577	54.5%	61.4%	11,220				
TOTAL	29,319	18,655	63.6%	78.9%	11,339				

^{***} Data withheld due to low population counts and/or case counts

Adult/Adolescent Total Living HIV Cases: Reported HIV diagnoses, age 13 years or older at HIV diagnosis, with or without an AIDS diagnosis, and not reported to have died as of 3/31/2017.

Jurisdiction of Residence: Jurisdiction of residence at time of initial HIV diagnosis or most recent lab test.

Recent Viral Load Test Result: The most recent viral load test result measured in the specified year, reported through 3/31/2017.

Percent Suppressed (Viral Load): Percent of adult/adolescent total living HIV cases with a most recent viral load measured in the specified year of less than 200 copies per milliliter reported through 3/31/2017.

Median Unsuppressed (Viral Load): Median unsuppressed viral load (copies per milliliter) among adult/adolescent living HIV cases with a most recent viral load test result measured in the specified year of 200 copies per milliliter or greater, reported through 3/31/2017.